

Psychological tyranny prescribed by the DWP:

preventable harm is government policy

GP'S OPINION OF PEOPLE'S SICKNESS NOW RENDERED MEANINGLESS

Influenced by corporate America, the commonly labelled 'welfare reforms' began in July 2006 with the introduction of the Welfare Reform Bill by the New Labour government, and guaranteed that claimants of long-term out-of-work sickness and disability benefit were to be coerced and intimidated by the Department for Work and Pensions (DWP) simply for committing the 'crime' of being too ill to work.

In October 2018 it will be 10 years since the DWP replaced Incapacity Benefit with the Employment and Support Allowance (ESA), adopted the Work Capability Assessment (WCA) to be conducted by an unaccountable private contractor to resist funding the ESA, and guaranteed that GP opinion would be rendered meaningless for chronically ill patients in need of financial support by the DWP.¹

ALL MEDICAL EVIDENCE DISREGARDED

Access to medical history is not available to the private contractor who conducts the WCA, and the DWP administrators who allocate the ESA admitted to Professor Malcolm Harrington as long ago as 2010 that they don't understand the medical paperwork provided by claimants to support their ESA applications.² These DWP 'Decision Makers' confirmed that they disregard all medical evidence and simply confirm the findings of the WCA, which is described as a 'non-medical functional assessment'.³

ALLOWING PREVENTABLE HARM

The former DWP Chief Medical Officer, Mansel Aylward, moved from the DWP in 2005 to the then named UnumProvident Centre for Psychosocial and Disability Research at Cardiff University, with funding by the American corporate giant who sponsored the new research centre with £1.6 million. Together with Gordon Waddell, Aylward produced discredited 'policy based' research⁴

in the 2005 DWP commissioned report: *The Scientific and Conceptual Basis of Incapacity Benefits*⁵ which supported the DWP's planned course of action to demolish the welfare state.

DWP Ministers insisted that they were helping chronically sick and disabled people to take responsibility for their own financial future by searching for employment. In reality, various reforms to social welfare policies allowed preventable harm by the State to creep into disabled people's lives. The flawed Waddell and Aylward biopsychosocial (BPS) model of assessment¹ was used by the DWP to justify the use of the WCA, and the excessive use of sanctions against ESA claimants are known to cause identified preventable harm, including starvation, for those least able to protest.⁶

CREATING FEAR WITHIN THE DISABLED COMMUNITY

The previous psychological security of the welfare state, which had guaranteed an income for chronically ill and disabled people who are unable to work, has been totally demolished. It has been replaced by psychological tyranny, which escalated since the coalition government adopted austerity measures alongside the ongoing reforms to social security benefits. Resisting funding long-term sickness benefit was the principal goal of the DWP, which included the reduction of income for ESA claimants to the equivalent of the unemployment benefit known as Jobseeker's Allowance; thus disregarding the additional costs of living with a disability.

Guided by the 2001 Malingering and Illness Deception Conference, there is a strong ideological resistance within the DWP as to the reality of the lives of chronically ill and disabled people who are not in paid employment. Influenced by the American corporate giant Unum (Provident) Insurance since 1992,⁷ future social welfare policies would create fear within the disabled community, with an NHS report advising that 50% of ESA claimants had attempted suicide

at some point.⁸ The Waddell and Aylward BPS model of assessment disregards diagnosis, prognosis, past medical history and prescribed medicines. So does the WCA.

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